Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10616604

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			34		ar at a			TE.	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			C FEE			BASIC FEE	750.00
			5		* 14				070.00	OH		730.00
TOTAL CHARGEABLE CLAIMS			<u> </u>		* _		X\$	9=	126	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =				X4	2=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+14	40=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TO	TAL	501	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER THAN	
(Column 1) CLAIMS			• • • • • • • • • • • • • • • • • • •	(Colum				SMALL ENTITY		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		. =	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	2=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								10=		OR	+280=	
TOTAL ADDIT. FEE											TOTAL	
(Column 1) (Column 2) (Column 3)								FEE		10	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		2	X4	2=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										000	
								10=		OR	+280=	
								OTAL FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	power and the second second		mn 2)	(Column 3)	ı <u></u>					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X4	 2=			X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						I			OR		
*	If the entry in eating	mn 1 is loss than t	ho ontre in acti	mn O samia	a "O" in c-	duma 2	+14			OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	id For" (Total o	ndepend	tent) is the	and, enter 3. e highest numbe	er found in	the ap	propriate bo	x in co	lumn 1.	